

EXECUTIVE LOBBYING EXPENDITURE REPORT
FORM 507

- COVERING JANUARY 1 - JUNE 30, _____ - DUE AUGUST 15
 COVERING JANUARY 1 - DECEMBER 31, 2005 - DUE FEBRUARY 15

Mail to: the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808
OR
Fax to: (225)763-8787 or (225)763-8780

147
Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 08/15/05

ERA(02102)

3060408 (02102)
3060407 (08105)

1. Name: Gilbert Walter F.
Last First MI

2. Business Address: 207 Cedar Tree Dr., Thibodaux, La. 70301
Street and No. City State Zip

Mailing Address 207 Cedar Tree Dr., Thibodaux, La. 70301

3. Business Phone 985-447-5669
Area Code and Telephone Number

4. Total of all executive lobbying expenditures made January 1 through June 30: \$ 2,419.56
(Include expenditures from Schedules A and B)
5. Total of all executive lobbying expenditures made July 1 through December 31: \$ 2,524.98
(When Applicable) (Include expenditures from Schedules A and B)
6. Total of all executive lobbying expenditures made during calendar year: \$ 4,944.54
(Line 4 added to Line 5 should equal Line 6)

7. Did you make an expenditure exceeding \$50 on one occasion for an executive branch official:

From January 1 through June 30? Yes No NA
From July 1 through December 31? Yes No NA

If the answer to either question in Number 7 above is YES, complete Schedule A and attach.

8. Did you make expenditures exceeding the sum of \$250 for an executive branch official:

From January 1 through June 30? Yes No NA
From July 1 through December 31? Yes No NA

If the answer to either question in Number 8 above is YES, complete Schedule A and attach.

9. Did you expend funds for any reception, social gathering, or other function to which more than twenty-five executive branch officials were invited during this reporting period?

Yes No

If the answer to Number 9 above is YES, complete Schedule B and attach.

Missing numbered pages were blank and had no information on them.

EXECUTIVE LOBBYING EXPENDITURE REPORT

Executive Lobbyist Registration No. _____

II. PROVIDE BELOW (a) the name of the executive branch department as listed in the executive branch schedule; (b) the aggregate total of all expenditures attributable to the department made during the January 1 - June 30 reporting period; (c) the aggregate total of all expenditures attributable to the department made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year attributable to the department.

1) a. Name of Department: Department of Health Hospitals

b. Total of all expenditures made January 1 through June 30: \$ 2,419.56

c. Total of all expenditures made July 1 through December 31:
(When applicable) \$ 2,524.98

d. Total of all expenditures made during the calendar year: \$ 4,944.54

2) a. Name of Department: _____

b. Total of all expenditures made January 1 through June 30: \$ _____

c. Total of all expenditures made July 1 through December 31:
(When applicable) \$ _____

d. Total of all expenditures made during the calendar year: \$ _____

3) a. Name of Department: _____

b. Total of all expenditures made January 1 through June 30: \$ _____

c. Total of all expenditures made July 1 through December 31:
(When applicable) \$ _____

d. Total of all expenditures made during the calendar year: \$ _____

II. PROVIDE BELOW (a) the name of the executive branch department and the individual agency as listed in the executive branch schedule; (b) the aggregate total of all expenditures attributable to the agency made during the January 1 - June 30 reporting period; (c) the aggregate total of all expenditures attributable to the agency made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year attributable to the agency.

1) a. Name of Department and Individual Agency: Department of Health Hospitals - Leon J. Chabot

Med. Center

b. Total of all expenditures made January 1 through June 30: \$ 1,198.49

c. Total of all expenditures made July 1 through December 31: \$ 1,112.73
(When applicable)

d. Total of all expenditures made during the calendar year: \$ 2,311.22

2) a. Name of Department and Individual Agency: Department of Health Hospitals - Charity of N.O.
b. Total of all expenditures made January 1 through June 30: \$ 1,221.07 Med. Center
c. Total of all expenditures made July 1 through December 31: \$ 769.35
(When applicable)
d. Total of all expenditures made during the calendar year: \$ 1,990.42

3) a. Name of Department and Individual Agency: Department of Health Hospitals - Earl K. Long
b. Total of all expenditures made January 1 through June 30: \$ 0 Med. Center
c. Total of all expenditures made July 1 through December 31: \$ 642.90
(When applicable)
d. Total of all expenditures made during the calendar year: \$ 642.90

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.



Signature of Lobbyist